

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749312

Entity Name: WILDEWOOD SPRINGS II-B CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 29, 2024
Secretary of State
6320643389CC**Current Principal Place of Business:**C/O DELLCOR MANAGEMENT INC.
310 PEARL AVENUE
SARASOTA, FL 34243**Current Mailing Address:**C/O DELLCOR MANAGEMENT INC.
310 PEARL AVENUE
SARASOTA, FL 34243 US**FEI Number: 59-2002764****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DELLCOR MANAGEMENT INC.
C/O DELLCOR MANAGEMENT INC.
310 PEARL AVENUE
SARASOTA, FL 34243 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE: JENNY BARNES****04/29/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	GLASSMAN, JON
Address	C/O DELLCOR MANAGEMENT INC. 310 PEARL AVENUE
City-State-Zip:	SARASOTA FL 34243

Title	SECRETARY
Name	SANDSTROM, JACK
Address	C/O DELLCOR MANAGEMENT INC. 310 PEARL AVENUE
City-State-Zip:	SARASOTA FL 34243

Title	PRESIDENT
Name	WEICHEL, CRAIG
Address	C/O DELLCOR MANAGEMENT INC. 310 PEARL AVENUE
City-State-Zip:	SARASOTA FL 34243

Title	DIRECTOR
Name	LANGE, TERRY
Address	C/O DELLCOR MANAGEMENT INC. 310 PEARL AVENUE
City-State-Zip:	SARASOTA FL 34243

Title	VP
Name	FOSSEN, KATHY
Address	C/O DELLCOR MANAGEMENT INC. 310 PEARL AVENUE
City-State-Zip:	SARASOTA FL 34243

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG WEICHEL**PRESIDENT****04/29/2024**

Electronic Signature of Signing Officer/Director Detail

Date